

**New Jersey Equine Advisory Board  
P.O. Box 330  
Trenton, NJ 08625  
(609) 984-4389**

**Sara Dubinin Scholarship  
APPLICATION FORM  
Due by January 2, 2014  
(Please write legibly)**

Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ e-mail \_\_\_\_\_

Name of Parents \_\_\_\_\_

Name of School Contestant Attends \_\_\_\_\_

Age \_\_\_\_\_ Sex ( F ) ( M ) Date of Birth \_\_\_\_\_ Grade Level \_\_\_\_\_

Name of Organization affiliated with\*\*

\_\_\_\_\_

Signature of Contestant \_\_\_\_\_

Signature of Parent/Guardian (if under 18) \_\_\_\_\_